

Editorials

Of Dictators and Czars in Health Care and Elsewhere

IN JUNE OF 1982 the California legislature acted essentially without any public discussion or review to give one person unprecedented authority to negotiate and award contracts to hospitals and other organizations to provide health care for Medi-Cal patients. Medi-Cal is California's name for its Title XIX or Medicaid program. The authority to make contracts appears to be absolute and the negotiations for them have been conducted in secrecy. Things have moved rapidly and many contracts were to become operative on January first.

The scenario that must have occurred seems to have been somewhat as follows: For many reasons, not the least of which has been additional entitlements to Medi-Cal benefits authorized by the legislature over the years, the cost of the program has been rising while the revenues to the state did not keep pace with these and other legislatively mandated expenditures. A crisis occurred when the legislators recognized that the Medi-Cal expenditures had gotten so out of hand that they were seemingly beyond control at a time when the legislature was faced with a constitutional requirement to balance the state budget. In what must have been an atmosphere of legislative desperation, Mr William Guy, a person of reputed knowledge and experience in the financing of health care services, evidently persuaded or was persuaded by the governor and the legislature that if he were given the absolute authority he could solve their problems—that is, reduce the cost of the Medi-Cal program. He was given the authority and is now called the “Medi-Cal czar.” How well the problem is solved remains to be seen.

There has long been a school of thought that when in a free society things get so out of hand as to seem unmanageable, a people will eventually become frustrated and frightened enough to turn to and follow someone who is sufficiently self-confident and charismatic to convince them that he has the answers and can solve the problems if they will just give him the authority and let him do it. Dictators have been created by the legislative process before and have ruled nations. Some of us are old enough to remember when such a process took place in Germany, and more of us are old enough to remember its aftermath. Freedom and the democratic process have been surrendered for what was thought to be certainty or order. To see this happening now, and here, even in one program in health care, gives one pause and certainly much food for thought. Is this really the way we ought to go or want to go in health care, or in the nation for that matter?

—MSMW

Consequences of Nuclear Warfare

THE FALL 1982 ISSUE of *Daedalus*, the journal of the American Academy of Arts and Sciences, concentrates on the subject of “print culture and video culture.” In the preface the editor discusses the “information revolution” of the 20th century. He suggests that there is an “obligation to estimate whether today's information revolution is ‘the event of our age,’ transcending all others, reducing our century's putative major events—including the two world wars, the Russian Revolution, and the rise of Nazism—to local incidents of substantially less cosmic proportions.”

That is one point of view; other people might nominate other great phenomena of our time: air travel, space exploration, despoiling our natural resources, prolongation of the average span of human life from about 45 years in 1900 to about 75 years now and the present growth rate of the world's population.

While these together constitute an argument that our century has witnessed the greatest changes in the history of planet Earth, many of us believe them to be trivial when viewed against the present real possibility of a major war fought with nuclear weapons. As described in this issue of the journal, such a conflict could reduce much of the northern hemisphere to rubble, killing a substantial proportion of the population and destroying governments, order, culture—indeed, the whole fabric of society. Furthermore, the effect of such a conflict on Earth's tenuously balanced ecosystem could threaten to end all life on the planet.

We members of the medical profession cannot ignore such a possibility. As ones whose lives and training are devoted to protecting the health of humankind, we have an obligation to inform ourselves about the facts and to be in a position to help others understand the terrible danger represented by the stockpiling of nuclear warheads in the arsenals of the United States and the Soviet Union, soundless and secret-shrouded.

In recent years organizations such as the Union of Concerned Scientists, the Federation of American Scientists and the National Academy of Sciences have released bulletins that indicate steadily increasing alarm about the possibility and consequences of a nuclear holocaust.

I am convinced this danger is clear and present and do not accept the viewpoint that the medical profession can ignore it, taking refuge in such tired excuses as “It's not our problem; it's too political,” or “Our leaders must know things we can't know,” or “What about the Russians?” or “Better dead than red.”

I believe that members of our profession *can* do something to help bring about a change from the collision course we appear to be on right now. Indeed, at least 15 national medical organizations, including the